



# The Town of Elsmere

11 Poplar Avenue, Elsmere, Delaware 19805

Phone (302) 998-2215 Fax (302) 998-9920

## REQUEST FOR INFORMATION

This form is provided for your convenience and to assist the staff in meeting your request for information retained by the Town. Your request will be reviewed upon submission and we will provide assistance in the most expeditious manner.

Please be as precise as possible in completing the request form. Once the form is submitted, the request will be reviewed for the following:

- a) All required information is provided.
- b) Expense to the applicant.
- c) Estimated time to complete action.

The staff member serving you will gauge the length of time required to provide the data.

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DATE OF THE REQUEST: \_\_\_\_\_

APPLICANT'S NAME: \_\_\_\_\_

APPLICANT'S ADDRESS: \_\_\_\_\_

APPLICANT'S PHONE NUMBER: \_\_\_\_\_

RECORD INFORMATION

ORIGINAL DATE: \_\_\_\_\_

ORIGINATOR'S NAME: \_\_\_\_\_

OTHER IDENTIFYING FEATURES: \_\_\_\_\_

\_\_\_\_\_

CIRCLE ONE: LETTER      REPORT      MAP      TRANSCRIPTION      TAPE

TIME AND DATE AVAILABLE TO REVIEW: \_\_\_\_\_

I REQUEST A COPY FOR: (CHECK ONE)      PICK UP      MAIL

PLEASE PROVIDE MY REQUEST NO LATER THAN: \_\_\_\_\_